A ECETVED SUNY PROSE OFFICE 2021 HOV 15 PH 3: 02

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Devin Ray Culley	
Write the full name of each plaintiff.	CV(Include case number if one has bee assigned)
-against- Yaqi Lee	COMPLAINT
	Do you want a jury trial? ☑ Yes □ No
Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.	_

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

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If the defendant	is an individual:		
The defendant,	Yaqi Lee (Defendant's name)		is a citizen of the State of
New York			
or, if not lawfull subject of the for	ly admitted for perma	anent residence in the Ui	nited States, a citizen or
	is a corporation:	•	
The defendant,	**************************************	, is inco	rporated under the laws of
the State of			_
			•
If more than one		the complaint, attach addi	
II. PARTIES			
A. Plaintiff Inf	ormation		
Provide the follow pages if needed.	ing information for ea	ach plaintiff named in the	complaint. Attach additional
DEVIN	R	CULLE	ΕY
First Name	Middle In	nitial Last Name	
650 W 30	LN N		
Street Address	A 8 8 8	u was a s day	
MINIDOK	A PAUL	IDAHO	83347
County, City	-	State	Zip Code
20831213	65	buhwheat4	3@yahoo.com
Telephone Numbe	·r	Fmail Address (if ava	ilahle)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	YAQI	LEE			
	First Name	Last Name			
	Current Job Title (or other identifying information), www.facebook.com/freda.adler/ondon				
	Current Work Addres	s (or other address where defer NY	idant may be served)		
	County, City	State	Zip Code		
Defendant 2:					
	First Name	Last Name			
	Current Job Title (or o	other identifying information)			
	Current Work Addres	s (or other address where defer	ndant may be served)		
	County, City	State	Zip Code		
Defendant 3:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		

Defendant 4:			
•	First Name	Last Name	
	Current Job Title (or other identifying information)
	Current Work Add	dress (or other address where de	fendant may be served)
	County, City	State	Zip Code
III. STATEMEN	NT OF CLAIM		
Place(s) of occurre	ence: FACEBO	OOK	
Date(s) of occurre	ence: 9/20/2022	2	
FACTS:			
harmed, and wha additional pages i	it each defendant if needed.	pport your case. Describe what personally did or failed to do th qi Lee on facebook when the	nat harmed you. Attach
		a deposit. I have all docume	
		ords. This person lives in little	e asia ili mannatteri.
Total funds lost v	were 18,079.46		
WHITE			
	AND THE RESERVE OF THE PARTY OF		

INJURIES:
If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
IV. RELIEF
State briefly what money damages or other relief you want the court to order.
18,079.46 to be returned to us

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

4414410000

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

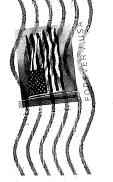
Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

***************************************	Plaintiff's Signa	ature
R	CULLEY	
Middle Initial	Last Name	
	IDAHO	83347
	State	Zip Code
	buhwheat43@yahoo.com	
	Email Address (if available)	
		R CULLEY Middle Initial Last Name IDAHO State buhwheat43

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

✓ Yes □ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.



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(Room 300. 10007 Streei

M Devin R Culley 650 W 30 Ln N Paul, ID 83347



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